Respirator Issuance and Fir , esting Log

COMMENT																
FIT TESTED RESPIRATOR BY: NUMBER																
FIT TESTED BY:																
FIELD TESTED YES NO									ť							
					_											
TYPE																
DATE																
DATE																
NAME																

Respirator Contamination Survey

				неѕрігат	or Contan	nination	Survey		
Respirator		WIPE	COUNT	TOTAL	TOTAL BKG. EFF. Net	EFF.	Net		
Number	DATE	NUMBER	TIME	COUNTS	COUNTS	FACTOR	dpm/100 ²	Tech Initials	Comments
If removable contamination is greater than 100 dpm/100cm² the area needs to be cleaned and recampled arior to make	contamina	tion is great	er than 100	dpm/100cm ²	the area need	ds to he clea	ned and rec	mpled prior	7 1100

If removable contamination is greater than 100 dpm/100cm² the area needs to be cleaned and resampled prior to use.

Name	Data
4 194449	Date

Respiratory Protection Quiz 2009

Select the correct answer from the possible choices.

- 1. If you wear a respirator for only a few minutes, how often must you exchange?
 - a. Daily
 - b. Weekly
 - c. Monthly
 - d. Quarterly
- 2. If you are experiencing warm air blow back what is the likely cause?
 - a. Warm weather conditions.
 - b. Cartridges are starting to plug up.
 - c. No need for alarm.
 - d. All of the above.
- 3. When issued a clean respirator you must:
 - a. Fill out a respirator issuance log.
 - b. Fit test with irritant smoke.
 - c. Perform a field inspection of the respirator.
 - d. All of the above.
- 4. Who may issue a respirator?
 - a. Any supervisor.
 - b. I can check out my own respirator.
 - c. A member of the Radiation/Safety Department.
 - d. My direct supervisor.
- 5. When you are not wearing your respirator where must your respirator be stored?
 - a. In the zip locked plastic bag that comes with the device.
 - b. In your circuit.
 - c. In the Central Control Room.
 - d. Wherever you want.
- 6. A field inspection consists of:
 - a. Inspecting for cracks, wear marks and split rubber.
 - b. Checking the seals.
 - c. Checking the face shield.
 - d. All of the above.

7.	If you wear your respirator for more than four hours a shift, how often must you exchange the device?
	a. Daily.
	b. Weekly.
	c. Monthly.
	d. Quarterly.
8.	To wear a respirator, which of the following must be done?
	a. Be clean shaven.
	b. If you wear glasses, make sure you have a spectacle kit for the device.
	c. Perform a smoke test.
	d. All of the above.
9.	A full face respirator has what protection factor?
	a. 10
	b. 50
	c. 1,000
	d. 10,000
10.	A PAPR (Powered Air Purifying Respirator) is good for which environments?
	a. All environments on site.
	b. Dusty environment.
	c. Chemical mist environment.

- 11. An area posted as "Caution Airborne Radioactivity Area" means?
 - a. Airborne uranium concentration is above 25% of DAC.
 - b. Beta-Gamma levels are at or above 2 mrem/hr.
 - c. You must wear a respirator when you work in the area.
 - d. Both A and C.
- 12. Of the following which areas are mandatory respirator areas?
 - a. Yellowcake Dryers.

d. None of the above.

- b. Vanadium Packaging Area.
- c. Yellowcake Packaging Area.
- d. Any area labeled as an airborne radioactivity area.
- e. All of the above.
- 13. Occasional respirator use requires device exchange:
 - a. Daily.
 - b. Weekly.
 - c. Monthly.
 - d. Quarterly.

- A field test is not required every time the seal is broken during usage: 14. a. True. b. False. What type of respirator protection is available at this facility? 15.
 - a. Full faceb. PAPR

 - c. SCBA
 - d. All of the above.

FitTest Results

Denison Mines (USA) Corp

FitTrack 3000

6425 S Hyay 101

		Blanding, Utah 84511		
Last Name Personnel ID Medical Eval Da	te	First Name Department	Middle Initial Job Code	
Test Date Mask Mfg. Mask Type Notes	MSA Full Mask	Test Time Mask Model Work Rate	Min FitFactor Mask Size CartType	
Protocol Name	NGS STATE OF THE S	Challenge Pressure	Respirator Rate	
Step Num	Step Description		Fit Factor Leak R	ate
1	Don & Face Forward			
2	Bend at the Waist & Face	Forward		
3	Shake Head & Face Forwa	ard		
4	Redon & Face Forward			
5	Redon & Face Forward			
	Test Results	Equivalent Fit Factor	r Average Leak Rate	
		Operator :		

Daily Respirator Check

Date:
aspector:
1. Clean Respirators
2. Dirty Respirators
3. Number of Outstanding Respirators
4. Number of Cartridges that are available
5. Number of Respirators in the Washer
6. Number of Respirators in the Dryer

Respirator Protection Program P	rocedure Review/Training
Date :	
I have read and been trained in the	ne Radiation Protection Manual Procedure.
Name	Signed
Instructor	
Name	Signed